

### **JURY QUESTIONNAIRE**

The parties propose the following questions to add to the Court's standard questionnaire:

*Defendant He has marked with an asterisk the questions she believes are critical and, if there are space limitations, Defendant He asks that these questions be included.*

### **HISTORICAL QUESTIONS**

1. Do you own your home, rent or live with family or friends?\*

Own                      Rent                      Live with Family/Friends

2. Have you ever served as a member of a trial jury in state or federal court?

Yes                      No

If so, what was the general nature of the matter?

Criminal                      Civil

Was a verdict reached?

Yes                      No

3. Do you or someone close to you have any education or employment in the following?\*

**[CHECK THE BOXES AS THEY APPLY AND EXPLAIN BELOW]**

Self      Other      None

Psychology/Social Work

Psychiatry

Diagnosis or treatment of mental health conditions

Diagnosis or treatment of ADHD

Medicine/Health care

Computer science/ IT/Engineering

Compliance/Regulatory oversight

Insurance

Pharmacology/Pharmacy

Please Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you ever been an officer or director of a corporation, including a nonprofit?\*

Yes                      No

If yes, please explain, including title, duties, when and for how long:

\_\_\_\_\_  
\_\_\_\_\_

5. Have you, a family member, or a close friend ever started your/their own business?

Yes                      No

If yes, please explain, including nature of business:

\_\_\_\_\_  
\_\_\_\_\_

6. Have you ever worked for, or invested in, a start-up or any kind of tech company?\*

Yes                      No

If yes, please explain, including: which company, when, for how long, and if employment, your title, and duties and responsibilities, and if investment, the nature of your investment.

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\_\_\_\_\_

7. Have you, a family member, or a close friend ever had a negative experience with a medical professional?

Yes                      No

If yes, please explain.

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8. Have you or someone close to you ever filed a lawsuit, or a complaint with any professional, state or federal agency, about a licensed medical professional or a licensed mental health practitioner?

Yes                      No

If yes, please explain.

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**ADHD EXPERIENCE**

9. Have you or someone close to you ever received counseling, therapy or been evaluated by a mental health practitioner for any reason?\*

Yes, self      Yes, someone close      Yes, both      No

If yes, please explain, including who, when, for how long, and the outcome:

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If yes, was your/their experience positive, negative or neutral?

Positive      Neutral      Negative

If negative, please explain, including what happened and the source of the problem:

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10. Have you or someone close to you ever been misdiagnosed by a licensed medical professional or a licensed mental health practitioner?\*

Yes, self    Yes, someone close    Yes, both    No

If yes, please explain, including the parties involved, when it occurred, the nature of the misdiagnosis, problems caused by the misdiagnosis and the outcome.

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11. Have you read any books, magazines, articles (whether online or in print) or viewed any interviews, lectures or commentary about ADHD or ADHD medication (including Adderall, Ritalin, Focalin, Concerta, or Vyvanse )?\*

Yes                  No

If yes, please explain.

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12. Have you or someone close to you ever been diagnosed with ADHD or seen a licensed mental health practitioner about symptoms commonly associated with ADHD?\*

Yes                  No

If yes, please explain, including who, when, the diagnosis if any, treatment regimen, medications prescribed, and your/their satisfaction with the care you/they received.

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**MEDICATION HISTORY (PRESCRIPTIONS)**

13. Have you or someone close to you ever been prescribed ADHD medication (including Adderall, Ritalin, Focalin, Concerta, or Vyvanse)?\*

Yes, self    Yes, someone close    Yes, both    No

If yes, please explain, including which drug, who, when, for how long, its effectiveness and any problems you/they had with the medication.

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14. Have you or someone close to you ever abused, misused, or developed an addiction to prescription medication (including ADHD medication, such as Adderall, Ritalin, Focalin, Concerta, or Vyvanse)?\*

Yes, self    Yes, someone close    Yes, both    No

If yes, please explain.

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15. Have you formed any opinions about ADHD or ADHD medication (including Adderall, Ritalin, Focalin, Concerta, or Vyvanse)?\*

Yes                      No

If yes, please describe those opinions.

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**PERSONAL OPINIONS**

16. Have you formed any opinions about any of the following:\*

- Psychology/Social Work
- Psychiatry
- Diagnosis or treatment of mental health conditions
- Telehealth or Digital Health (mobile apps, etc.)
- Medicine/Health care in the United States

Yes No

If yes, please describe those opinions.

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17. Have you formed any opinions about any of the following:\*

- Corporate executives
- women who are entrepreneurs or executives
- young people who are entrepreneurs or executives
- Chinese nationals living and working in the United States
- Medical professionals

☐ Yes ☐ No

If yes, please describe those opinions.

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18. Do you have any strong feelings about the government regulating controlled substances or prescription drugs in this country – positive or negative?

If yes, would that experience hinder your ability to be impartial in a case that involved allegations against a medical professional?

19. This case was investigated by the Drug Enforcement Administration (DEA), the Department of Health and Human Services Office of the Inspector General (HHS-OIG),

the Internal Revenue Service (IRS), and the Department of Homeland Security – Homeland Security Investigations (HSI). To the best of your knowledge, have you, or any member of your family, or any of your close friends, had any experiences, positive or negative, with these agencies? If so, please explain.

If “yes,” would you be able to put those feelings and experiences aside and render a verdict based on the evidence before you?

20. Do you have any strongly held beliefs—religious or otherwise—to the United States government making laws that regulate controlled substances and prescription drugs?
21. If a physician or medical professional testifies, would their occupation make you more or less likely to believe their testimony?
22. Do you have any strongly-held beliefs, religious or otherwise, pertaining to Medicare, Medicaid, or government-provided health insurance, or beneficiaries of such programs?

The following questions are requested by one party and disputed by the other:

1. If you were the defendant on trial in this case, would you want someone on your jury who thinks about these issues the way you do?\* **[requested by Defendant He]**

Yes

No

If not, please explain.

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